

CHAPTER 453 MEDICINE AND SURGERY

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[PART I. GENERALLY]

§453-1 Practice of medicine defined. For the purposes of this chapter the practice of medicine includes the use of drugs and medicines, water, electricity, hypnotism, or any means or method, or any agent, either tangible or intangible, for the treatment of disease in the human subject; provided that when a duly licensed physician pronounces a person affected with any disease hopeless and beyond recovery and gives a written certificate to that effect to the person affected or the person's attendant nothing herein shall forbid any person from giving or furnishing any remedial agent or measure when so requested by or on behalf of the affected person.

This section shall not amend or repeal the law respecting the treatment of those affected with Hansen's disease.

§453-2 License required; exceptions. (a) Except as otherwise provided by law, no person shall practice medicine or surgery in the State either gratuitously or for pay, or shall offer to so practice, or shall advertise or announce one's self, either publicly or privately, as prepared or qualified to so practice, or shall append the letters "Dr." or "M.D." to one's name, with the intent thereby to imply that the individual is a practitioner of medicine or surgery, without having a valid unrevoked license or a limited and temporary license, obtained from the board of medical examiners, in form and manner substantially as hereinafter set forth.

- (b) Nothing herein shall:
 - (1) Apply to so-called Christian Scientists so long as they merely practice the religious tenets of their church without pretending a knowledge of medicine or surgery;
 - (2) Prohibit service in the case of emergency or the domestic administration of family remedies;
 - (3) Apply to any commissioned medical officer in the United States armed forces or public health service engaged in the discharge of one's official duty, nor to any practitioner of medicine and surgery from another state when in actual consultation, including but not limited to, in-person, mail, electronic, telephonic, fiber-optic, or other telemedicine consultation with a licensed physician of this State, if the physician from another state at the time of such consultation is licensed to practice in the state in which the physician resides; provided that:
 - (A) The physician from another state shall not open an office, or appoint a place to meet patients, or receive calls within the limits of the State; and

- (B) The licensed physician of this State retains control and remains responsible for the provision of care for the patient; and
- provided further that the laws and regulations relating to contagious diseases are not violated;
- (4) Prohibit services rendered by any person certified under part II of this chapter to provide emergency medical services, or any physician assistant, when the services are rendered under the direction and control of a physician licensed in this State except for final refraction resulting in a prescription for spectacles, contact lenses, or visual training as performed by an oculist or optometrist duly licensed by the State. The direction and control shall not be construed in every case to require the personal presence of the supervising and controlling physician. Any physician who employs or directs a person certified under part II of this chapter to provide emergency medical services, or physician assistant, shall retain full professional and personal responsibility for any act which constitutes the practice of medicine when performed by such person or physician assistant; or
 - (5) Prohibit automatic external defibrillation by:
 - (A) Any first responder personnel certified by the department of health to provide automatic external defibrillation when it is rendered under the medical oversight of a physician licensed in this State; or
 - (B) Any person who successfully completes training under an automatic external defibrillator program administered by a physician. An "automatic external defibrillator program" means an appropriate training course that includes cardiopulmonary resuscitation and proficiency in the use of an automatic external defibrillator.
 - (c) Nothing herein shall prohibit traditional Hawaiian healing practices by traditional native Hawaiian healers, both as recognized and certified as such by a panel convened by Papa Ola Lokahi. No person or organization involved with the selection of panel members or the denial of certification of healers under this subsection shall be held liable for any cause of action that may arise out of their participation in the selection or certification process.

§453-3 Limited and temporary licenses. The board of medical examiners shall issue a limited and temporary license to an applicant who has not been examined as required by section 453-4, and against whom no disciplinary proceedings are pending in any state or territory, if the applicant is otherwise qualified to be examined, and upon determination that:

- (1) There is an absence or a shortage of licensed physicians in a particular locality, and that the applicant has been duly licensed as a physician by written examination under the laws of another state or territory of the United States. A limited and temporary license issued hereunder shall permit the practice of medicine and surgery by the applicant only in the particular locality, and no other, as shall be set forth in the license issued to the applicant. The license shall be valid only for a period of eighteen months from the date of issuance. The board shall establish guidelines to determine a locality with an absence or shortage of physicians. For this purpose, the board may consider a locality to have an absence or shortage of physicians if the absence or shortage results from the temporary loss of a

physician. In designating a locality with an absence or shortage of physicians, the board shall not delegate its authority to a private organization;

- (2) The applicant is to be employed by an agency or department of the state or county government, and that the applicant has been duly licensed as a physician by written examination under the laws of another state or territory of the United States. A limited and temporary license issued hereunder shall only be valid for the practice of medicine and surgery while the applicant is in the employ of such governmental agency or department and in no case shall be used to provide private patient care for a fee. A license issued under this paragraph may be renewed from year to year;
- (3) The applicant would practice medicine and surgery only while under the direction of a physician regularly licensed in the State other than as permitted by this section, and that the applicant intends to take the regular licensing examination conducted by the board within the next eighteen months. A limited and temporary license issued under this paragraph shall be valid for no more than eighteen months from the date of issuance, unless otherwise extended at the discretion of the board of medical examiners; provided that this discretionary extension shall not exceed a period of six months beyond the original expiration date of the limited and temporary license;
- (4) The applicant has been appointed as a resident or accepted for specialty training in a health care facility or organized ambulatory health care facility as defined in section 323D-2 or a hospital approved by the board, and that the applicant shall be limited in the practice of medicine and surgery to the extent required by the duties of the applicant's position or by the program of training while at the health care facility, organized ambulatory health care facility, or hospital. The license shall be valid during the period in which the applicant remains as a resident in training, and may be renewed from year to year during the period; or
- (5) A public emergency exists, and that the applicant has been duly licensed as a physician by written examination under the laws of another state or territory of the United States. A limited and temporary license issued hereunder shall only be valid for the period of such public emergency.

Nothing herein requires the registration or licensing hereunder of nurses, or other similar persons, acting under the direction and control of a licensed physician.

§453-3.1 REPEALED.

[§453-3.2] Educational teaching license. (a) The board may issue an educational teaching license to a physician who is not licensed in this State and who is invited by the chief of service of a clinical department of a hospital to provide and promote professional education for students, interns, residents, fellows, and doctors of medicine in this State. In no case shall an educational teaching license issued hereunder be valid for more than a period of twelve months from the date of issuance of the license.

- (b) To receive an educational teaching license, the applicant shall:

- (1) Complete an application as prescribed by the board which shall include a summary of the applicant's medical, educational, and professional background;
 - (2) Provide proof that the applicant is licensed as a physician in another state or country and the license is current and in good standing;
 - (3) Submit a letter with the application signed by the chief of service of a clinical department of a hospital attesting that the chief of service is a licensed physician of this State and is requesting to sponsor and monitor the applicant while the person is engaged in educational or teaching activities for the hospital under an educational teaching license; and
 - (4) Pay all applicable fees.
- (c) The holder of an educational teaching license shall not open or appoint a place to meet patients, or receive calls from patients relating to the practice of medicine, beyond the parameters of the hospital that is sponsoring and monitoring the licensee's activities.
- (d) The holder of an educational teaching license shall obey all laws and rules of this State.

[§453-3.5] Training replacement temporary license. (a) The board may issue a limited and temporary license to a physician to maintain patient services for the purpose of substituting for another physician licensed in this State to enable specialized training at an out-of-state fully accredited medical teaching institution; provided that the out-of-state physician:

- (1) Is board certified by the American Board of Medical Specialties in the subspecialty in which the Hawaii physician is seeking training;
- (2) Is a member of the teaching faculty of the accredited medical teaching institution;
- (3) Has an unrestricted license in another state;
- (4) Has been invited by the chief of a clinical department of a hospital; and
- (5) Has been examined and approved by the hospital's credential process.

The limited and temporary license issued under this section shall expire upon notification of the board by the Hawaii-licensed physician that the physician has resumed the physician's practice in this State. Licenses and extensions of licenses issued under this section to an individual shall not be valid for more than nine months during any consecutive twenty-four month period.

(b) The chief of the clinical department in which the out-of-state physician will practice shall submit a letter to the board which shall include, without limitation, the following:

- (1) Identification and documentation of unrestricted license for the applicant for the specialty training license;
- (2) A statement that the hospital is sponsoring the applicant, and shall be responsible for monitoring the individual physician during the period of the temporary license;
- (3) Verification of the start and end dates for the requested temporary license; and
- (4) Verification that the chief of the clinical department is a licensed physician of this State.

(c) The holder of a specialty training license shall obey and be subject to all laws and rules of this State.

§453-4 Qualifications for examination and licensure. (a) Except as otherwise provided by law, no person shall be licensed to practice medicine or surgery unless the applicant has passed an examination and has been found to possess the necessary qualifications. No applicant shall be eligible for the examination sooner than the first year of residency; provided that if the applicant is a graduate of a foreign medical school, the applicant shall be eligible no sooner than the second year of residency.

(b) Before any applicant shall be eligible for licensure, the applicant shall furnish proof satisfactory to the board that:

(1) The applicant is of demonstrated competence and professional knowledge; and

(2) The applicant is a graduate of:

(A) A medical school or college whose program leading to the M.D. degree is accredited by the Liaison Committee on Medical Education, and has served a residency of at least one year in a program which has been accredited for the training of resident physicians by the Accreditation Council for Graduate Medical Education, or a residency of at least one year in a program in Canada which has been accredited for the training of resident physicians by the Royal College of Physicians and Surgeons of Canada, or the College of Family Physicians of Canada; or

(B) A foreign medical school and has had at least two years of residency in a program accredited by the Accreditation Council for Graduate Medical Education, or has had at least two years of residency in a program in Canada that has been accredited for the training of resident physicians by the Royal College of Physicians and Surgeons of Canada, or by the College of Family Physicians of Canada; and:

(i) Holds the national certificate of the Educational Commission for Foreign Medical Graduates or its successor, or for applicants with residency training in Canada, has passed with scores deemed satisfactory by the board, the Medical Council of Canada Evaluating Examination, or its successor; or

(ii) Holds the certificate of the Fifth Pathway Program of the American Medical Association;

provided that for a period of two years after June 26, 2004, the requirements of subsection (b)(2)(B)(i) and (ii) shall not apply to any applicant who has had four years of residency in a program accredited by the Accreditation Council for Graduate Medical Education and who has passed, with scores deemed satisfactory by the board, the Special Purpose Examination (SPEX).

(c) Applicants who have passed, with scores deemed satisfactory by the board, the National Board of Medical Examiners examination (NBME), the Federation Licensing Examination (FLEX), the United States Medical Licensing Examination (USMLE), or a combination of these examinations as approved by the board, or the Medical Council of Canada Qualifying Examination (MCCQE), and who meet the requirements of subsection (b) shall be licensed without the necessity of any further examination; provided that with respect to any applicant, the board may require letters of evaluation, professional evaluation forms, and interviews with chiefs of service or attending physicians who have been associated with an

applicant, or chief residents on a service who have been associated with an applicant during the applicant's training or practice, to be used by the board in assessing the applicant's qualifications to practice medicine.

(d) Applicants who are licensed in another state by virtue of having passed a state-produced examination may qualify for licensure if they have passed the Special Purpose Examination (SPEX) and meet the requirements of subsection (b); provided that the board may require letters of evaluation, professional evaluation forms, and interviews with chiefs of service or attending physicians who have been associated with an applicant, or chief residents on a service who have been associated with an applicant during the applicant's training or practice, to be used by the board in assessing the applicant's qualifications to practice medicine.

§453-4.5 Foreign medical graduates; alternative qualifications. Notwithstanding section 453-4(b)(2)(B), a graduate of a foreign medical school who has passed the Federation Licensing Examination (FLEX) or the United States Medical Licensing Examination (USMLE), or a combination of these examinations as approved by the board, with scores deemed satisfactory to the board, passed the qualifying examination of the Educational Commission for Foreign Medical Graduates prior to 1984, and has at least three years of medical training or experience in a hospital approved by the Council on Medical Education and Hospitals of the American Medical Association for internship or residency may be licensed by the board of medical examiners under section 453-4(c).

§453-5 Board of medical examiners; appointment, removal, qualifications. (a) For the purpose of carrying out this chapter, the governor shall appoint a board of medical examiners, whose duty it shall be to examine all applicants for license to practice medicine or surgery. As used in this chapter, "board" means the board of medical examiners.

The board shall consist of eleven persons, seven of whom shall be physicians or surgeons licensed under the laws of the State, two of whom shall be osteopathic physicians licensed under the laws of the State, and two of whom shall be lay members appointed from the public at large. Of the nine members who are physicians, surgeons, or osteopathic physicians, at least five shall be appointed from the city and county of Honolulu and at least one shall be appointed from each of the other counties. Medical societies in the various counties may conduct elections periodically but no less frequently than every two years to determine nominees for the board to be submitted to the governor. In making appointments, the governor may consider recommendations submitted by the medical societies and the public at large. Each member shall serve until a successor is appointed and qualified.

(b) The department shall employ, not subject to chapters 76 and 77, an executive secretary to administer the board's activities and an employee to administer the medical claim conciliation panels established under chapter 671. The employee responsible for administration of the medical claim conciliation panels shall have no duties in administration of the board's activities.

§453-5.1 Powers and duties of board. In addition to other powers and duties authorized by law, the board of medical examiners shall have all the powers necessary or convenient to effectuate the purpose of this chapter, including, without limitation, the following powers:

- (1) To adopt rules, pursuant to chapter 91; and
- (2) To enforce this chapter and rules adopted pursuant thereto.

§453-5.2 REPEALED.

§453-5.3 Physician assistant; licensure required. (a) The board of medical examiners shall require each person practicing medicine under the supervision of a physician, other than a person licensed under section 453-3, to be licensed as a physician assistant. A person who is trained to do only a very limited number of diagnostic or therapeutic procedures under the direction of a physician shall not be deemed a practitioner of medicine and therefore does not require licensure under this section.

(b) The board shall establish medical educational and training standards with which a person applying for licensure as a physician assistant shall comply. The standards shall be at least equal to recognized national education and training standards for physician assistants.

(c) Upon satisfactory proof of compliance with the required medical educational and training standards, the board may grant state licensure to a person who has been granted certification based upon passage of a national certifying examination and who holds a current certificate from the national certifying entity approved by the board.

(d) The board shall approve temporary licensure of an applicant under this section. The applicant shall have graduated from a board approved training program within twelve months of the date of application and never taken a national certifying examination approved by the board but otherwise meets the requirements of this section. The applicant shall file a complete application with the board and pay all required fees. If the applicant fails to apply for, or to take, the first examination scheduled by the board following the issuance of the temporary license, fails to pass the examination, or fails to receive licensure, all privileges under this section shall automatically cease upon written notification sent to the applicant by the board. A temporary license shall be issued only once to each person.

(e) Prior to practicing under temporary licensure, holders of temporary licenses shall notify the board in writing of any and all supervising physicians under whom they will be performing services.

(f) The board shall establish the degree of supervision required by the supervising physician when a physician assistant performs a service within the practice of medicine. A physician who does not supervise a physician assistant's services at the degree required by the board shall be deemed to have engaged in professional misconduct.

(g) Any license of a physician assistant may be denied, not renewed, revoked, limited, or suspended under section 453-8.

(h) The board shall establish the application procedure, medical educational and training standards, examination requirement, if any, and degrees of supervision by rule.

(i) Every person holding a license under this section shall apply for renewal with the board no later than January 31 of each even-numbered year and pay a renewal fee. Failure to apply for renewal shall constitute a forfeiture of the license that may only be restored upon written application for restoration and payment to the board of a restoration fee.

(j) A license that has been forfeited for one renewal term shall be automatically terminated and cannot be restored. A new application for licensure shall be required.

§453-5.4 Physician assistant advisory committee. There shall be a physician assistant advisory committee under the board of medical examiners consisting solely of persons licensed under section 453-5.3. The committee shall review all complaints and request relating to physician assistants, and review and recommend revisions of the physician assistant regulations.

The chairperson of the committee shall be the representative for the committee members to the board of medical examiners for the purpose of providing input to the board from the physician assistant's perspective on issues and concerns, including complaints and requests, regarding physician assistants. The chairperson shall not be a member of the board of medical examiners to avoid conflict of interest.

§453-6 Fees; expenses. (a) No applicant shall be examined under this chapter until the applicant has paid to the board application, examination, and license fees. The board may provide separate fees for licensure by endorsement and for limited and temporary licenses.

(b) Every physician or surgeon holding a license under this chapter shall renew the license with the board no later than January 31, of each even-numbered year, pay a renewal fee, and comply with the category 1 continuing medical education requirements provided in rules adopted by the board.

(c) A physician or surgeon shall meet the category 1 continuing medical education requirements by obtaining credit hours in a category 1 continuing medical education program accredited by the American Medical Association or in other approved category 1 continuing medical education as provided in the board's rules. To determine compliance, the board may conduct a random audit. A physician or surgeon selected for audit shall be notified by the board. Within sixty days of notification, the physician or surgeon shall provide to the board documentation to verify compliance with the category 1 continuing medical education requirements.

(d) Failure to renew, pay the renewal fee, and, in the case of audited physicians or surgeons, provide documentation of compliance shall constitute a forfeiture of license, which may be restored only upon the submission of written application therefor, payment to the board of a restoration fee, and, in the case of audited physicians and surgeons, documentation of compliance.

(e) A license that has been forfeited for one renewal term shall be automatically terminated and cannot be restored, and a new application for licensure shall be required.

§453-6.5 REPEALED.

§453-7 Form of license. The form of license to practice medicine and surgery shall be substantially as follows:

State of Hawaii, Board of Medical Examiners

License to Practice Medicine and Surgery

....., having been duly examined by the Board of Medical Examiners, and having been found to be possessed of the necessary qualifications, is hereby licensed to practice medicine and surgery in the State of Hawaii.

This license is granted and accepted on the express condition that it may be revoked at any time for any of the causes enumerated in section 453-8, Hawaii Revised Statutes, which cause or causes shall have been proven to the satisfaction of the Board of Medical Examiners.

Given under the seal of the Board of Medical Examiners this.....day of
....., A.D.....

By
Chairperson, Board of Medical Examiners

The form of temporary and limited license to practice medicine and surgery shall be substantially as follows:

State of Hawaii, Board of Medical Examiners

Limited and Temporary License to Practice

Medicine and Surgery

....., having been duly considered by the Board of Medical Examiners, and having been found to be possessed of the necessary qualifications, is hereby temporarily licensed to practice medicine and surgery in the State of Hawaii, subject to the following conditions and limitations:

.....
This temporary and limited license is granted and accepted on the express condition that it may be revoked at any time for any of the causes enumerated in section 453-8, Hawaii Revised Statutes, or for any violation of the conditions and limitations contained herein.

Given under the seal of the Board of Medical Examiners thisday of
....., A.D.....

By
Chairperson, Board of Medical Examiners

[§453-7.5] Review of complaints and information by department. (a) The department of commerce and consumer affairs shall review each complaint and information received under sections 92-17, 329-44, 453-8.7, 663-1.7, 671-5, and 671-15. The department shall investigate the complaint or information if it appears that the physician who is the subject of the complaint or

information has violated this chapter. If the department determines that the physician has violated this chapter, the department shall present the results of its investigation to the board of medical examiners for appropriate disciplinary proceedings.

(b) Reports of adverse decisions of peer review committees transmitted to the department under section 663-1.7 shall not be available to public inspection or subject to discovery and shall be held confidential by the department; provided that:

- (1) A written affirmative or negative reply may be given to a written inquiry by a hospital or health care facility as to whether a report of an adverse decision is on file with the department; and
- (2) A subpoenaed report shall be subject to the requirements under section 453-17.

§453-8 Revocation, limitation, suspension, or denial of licenses. (a) In addition to any other actions authorized by law, any license to practice medicine and surgery may be revoked, limited, or suspended by the board at any time in a proceeding before the board, or may be denied, for any cause authorized by law, including but not limited to the following:

- (1) Procuring, or aiding or abetting in procuring, a criminal abortion;
- (2) Employing any person to solicit patients for one's self;
- (3) Engaging in false, fraudulent, or deceptive advertising, including but not limited to:
 - (A) Making excessive claims of expertise in one or more medical specialty fields;
 - (B) Assuring a permanent cure for an incurable disease; or
 - (C) Making any untruthful and improbable statement in advertising one's medical or surgical practice or business;
- (4) Being habituated to the excessive use of drugs or alcohol; or being addicted to, dependent on, or a habitual user of a narcotic, barbiturate, amphetamine, hallucinogen, or other drug having similar effects;
- (5) Practicing medicine while the ability to practice is impaired by alcohol, drugs, physical disability, or mental instability;
- (6) Procuring a license through fraud, misrepresentation, or deceit, or knowingly permitting an unlicensed person to perform activities requiring a license;
- (7) Professional misconduct, hazardous negligence causing bodily injury to another, or manifest incapacity in the practice of medicine or surgery;
- (8) Incompetence or multiple instances of negligence, including but not limited to the consistent use of medical service which is inappropriate or unnecessary;
- (9) Conduct or practice contrary to recognized standards of ethics of the medical profession as adopted by the Hawaii Medical Association or the American Medical Association;
- (10) Violation of the conditions or limitations upon which a limited or temporary license is issued;
- (11) Revocation, suspension, or other disciplinary action by another state or federal agency of a license, certificate, or medical privilege for reasons as provided in this section;

- (12) Conviction, whether by nolo contendere or otherwise, of a penal offense substantially related to the qualifications, functions, or duties of a physician, notwithstanding any statutory provision to the contrary;
- (13) Violation of chapter 329, the uniform controlled substance act, or any rule adopted thereunder except as provided in section 329-122;
- (14) Failure to report to the board, in writing, any disciplinary decision issued against the licensee or the applicant in another jurisdiction within thirty days after the disciplinary decision is issued; or
- (15) Submitting to or filing with the board any notice, statement, or other document required under this chapter, which is false or untrue or contains any material misstatement or omission of fact.

(b) If disciplinary action related to the practice of medicine has been taken against the applicant in any jurisdiction that would constitute a violation under this section, or if the applicant reveals a physical or mental condition that would constitute a violation under this section, then the board may impose one or more of the following requirements as a condition for licensure:

- (1) Physical and mental evaluation of the applicant by a licensed physician approved by the board;
- (2) Probation, including such conditions of probation as requiring observation of the licensee by an appropriate group of society of licensed physicians or surgeons;
- (3) Limitation of the license by restricting the fields of practice in which the licensee may engage;
- (4) Further education or training or proof of performance competency; and
- (5) Limitation of the medical practice of the licensee in any reasonable manner to assure the safety and welfare of the consuming public.

§453-8.1 Voluntary limitation of license. A physician or surgeon may request, in writing, that the board limit the individual's license to practice. The board may grant the request and may impose conditions on the limited license. The board shall determine whether and when such limitation shall be removed.

§453-8.2 Disciplinary action. (a) In addition to any other actions authorized by law, in disciplining a licensee in a proceeding held in conformity with chapter 91, the board may impose one or more of the following sanctions:

- (1) Place the licensee on probation, including such conditions of probation as requiring observation of the licensee by an appropriate group or society of licensed physicians or surgeons;
- (2) Suspend the license;
- (3) Revoke the license;
- (4) Limit the license by restricting the fields of practice in which the licensee may engage;
- (5) Fine the licensee, including assessment against the licensee of the costs of the disciplinary proceedings. Any fine imposed by the board after a hearing in

accordance with chapter 91 shall be not less than \$500 and not more than \$5,000 for each violation, exclusive of the costs of the disciplinary proceedings;

- (6) Require further education or training or require proof of performance competency; or
- (7) Censure or reprimand.

(b) Unless otherwise expressly provided, the actions, remedies, or penalties provided by this chapter are cumulative to each other and to the actions, remedies, or penalties available under all other laws of this State.

§453-8.3, 8.5 REPEALED.

§453-8.7 Reporting requirements. (a) Every physician licensed pursuant to this chapter who does not possess professional liability insurance shall report any settlement or arbitration award of a claim or action for damages for death or personal injury caused by negligence, error, or omission in practice, or the unauthorized rendering of professional services. The report shall be submitted to the department of commerce and consumer affairs within thirty days after any written settlement agreement has been reduced to writing and signed by all the parties thereto or thirty days after service of the arbitration award on the parties.

(b) Failure of a physician to comply with the provisions of this section is an offense punishable by a fine of not less than \$100 for the first offense, \$250 to \$500 for the second offense, and \$500 to \$1,000 for subsequent offenses.

(c) The clerks of the respective courts of this State shall report to the department any judgment or other determination of the court which adjudges or finds that a physician is liable criminally or civilly for any death or personal injury caused by the physician's professional negligence, error, or omission in the practice of the physician's profession, or rendering of unauthorized professional services. The report shall be submitted to the department within ten days after the judgment is entered by the court.

(d) The department shall prescribe forms for the submission of reports required by this section.

§453-9 REPEALED.

§453-10 Witnesses in such proceeding. In any such proceeding the board may subpoena, administer oaths to, and examine witnesses on any relevant matter in such proceeding. The board may subpoena physicians or surgeons as specialists, on the recommendation of the appropriate specialist society. The board may order a mental, physical, or medical competency examination to determine the capacity or ability of a licensee to continue to practice medicine or surgery and order appropriate specialist societies to conduct such examinations. The person whose license is sought in such proceeding to be revoked, limited, or suspended shall be entitled to require the board or any member thereof to subpoena and to administer oaths to any witness or witnesses who may be able to present evidence relevant in such proceeding, and shall be entitled

to examine any such witness and any other witness in such proceeding. The circuit court of the circuit in which the proceeding is held may enforce by proper proceeding the attendance and testimony of witnesses in such proceeding.

§453-11 Recalcitrant witnesses; contempt. If any person called before the board as a witness in any proceeding, whether under subpoena or otherwise, except as privileged by law, refuses to answer any question which is relevant to the proceeding and is put to the individual by the board, a member thereof or the person whose license is sought to be revoked, limited, or suspended in the proceeding, or disobeys any order of the circuit court relating to the proceeding, the board shall report the matter in writing to any judge of the circuit court of the circuit in which such proceeding is held and the person shall be cited to appear before the circuit judge to show cause why the individual should not be punished for contempt of court under section 710-1077.

§453-12 Perjury. Any person who wilfully and knowingly makes under oath any false statement in connection with any such proceeding before the board shall be guilty of perjury and shall be subject to the penalty prescribed by law for perjury. Whenever the board is satisfied that the witness has committed perjury in any proceeding before the board, it shall report the same to the prosecuting officer of the county in which the perjury took place, who shall prosecute the witness for perjury.

§453-13 Penalty. Any person who violates this chapter, or who offers or in any way attempts to engage in the practice of medicine as defined in section 453-1 and fails to comply with any of the requirements or provisions of this chapter, penalty for which violation or failure to comply is not otherwise provided for, shall be fined not more than \$500 or imprisoned not more than six months and each day's violation or failure to comply shall be deemed a separate offense.

All tools, implements, medicine, and drugs used in the practice of medicine by any person convicted of practicing medicine without a license shall be declared forfeited to the State by the court and ordered destroyed.

§453-14 Duty of physician, surgeon, hospital, clinic, etc., to report wounds. Every physician and surgeon attending or treating a case of knife wound, bullet wound, gunshot wound, powder burn, or any injury that would seriously maim, produce death, or has rendered the injured person unconscious, caused by the use of violence or sustained in a suspicious or unusual manner, or, whenever such case is treated in a hospital, clinic, or other institution, the manager, superintendent, or person in charge thereof, shall report such case to the chief of police of the county within which the person was attended or treated, giving the name of the injured person, description of the nature, type, and extent of the injury, together with other pertinent information which may be of use to the chief of police. As used herein, the term "chief of police" means the chief of police of each county and any of the chief's authorized subordinates.

This section shall not apply to such wounds, burns, or injuries received by a member of the armed forces of the United States or of the State while engaged in the actual performance of duty.

Any person who fails to make the report called for herein within twenty-four hours after such attendance or treatment shall be fined not less than \$50 nor more than \$500.

§453-15 Who shall give consent to a postmortem examination. A pathologist or any licensed physician or surgeon may conduct a postmortem examination when written consent thereto is given by whoever of the following assumes custody of the body for purposes of burial: father, mother, husband, wife, reciprocal beneficiary, child, guardian, next of kin, or, in the absence of any of the foregoing, a friend or person, including a governmental agency, charged by law with the responsibility for the burial. If two or more such persons assume custody of the body, the consent of one of them is sufficient. The consent shall include the consent to the retention by the pathologist or licensed physician or surgeon who conducts the postmortem examination of tissues, including fetal material, of the body removed at the time of the postmortem examination to be used for necessary or advisable scientific investigation, including research, teaching, and therapeutic purposes.

[§453-16] Intentional termination of pregnancy; penalties; refusal to perform. (a) No abortion shall be performed in this State unless:

- (1) Such abortion is performed by a licensed physician or surgeon, or by a licensed osteopathic physician and surgeon; and
- (2) Such abortion is performed in a hospital licensed by the department of health or operated by the federal government or an agency thereof; and
- (3) The woman upon whom such abortion is to be performed is domiciled in this State or has been physically present in this State for at least ninety days immediately preceding such abortion. The affidavit of such a woman shall be prima facie evidence of compliance with this requirement.

(b) Abortion shall mean an operation to intentionally terminate the pregnancy of a nonviable fetus. The termination of a pregnancy of a viable fetus is not included in this section.

(c) Any person who knowingly violates this section shall be fined not more than \$1,000 or imprisoned not more than five years, or both.

(d) Nothing in this section shall require any hospital or any person to participate in such abortion nor shall any hospital or any person be liable for such refusal.

§453-17 Subpoena of peer review adverse decision report. In connection with an investigation under section 453-7.5, the director of commerce and consumer affairs may issue subpoenas, pursuant to section 26-9(j), compelling the production of hospital records of patients whose cases were reviewed by a peer review committee that filed a report pursuant to section 663-1.7, as well as the full report reflecting the committee's decision and the basis of that decision, notwithstanding section 624-25.5. A medical society, hospital, or health care facility shall expunge from the documents only the following patient identifiers: name, address,

telephone number, hospital identification number, and social security number. Information for investigation which was obtained through a subpoena shall be for the sole use by the department of commerce and consumer affairs to carry out its responsibilities and functions and shall be held confidential by the department, unless the information is admissible evidence at a hearing held under section 453-9. This investigation shall be deemed a sensitive matter related to public safety under section 92-5.

PART II. EMERGENCY MEDICAL SERVICE PERSONNEL

§453-31 Emergency ambulance service personnel. The practice of any emergency medical services by any individual employed by an emergency ambulance service who is not licensed under this chapter or under chapter 457 shall be subject to certification under this part. In the event of any conflict between this part and any rules adopted under section 453-2, the provisions of this part shall control with regard to emergency ambulance service personnel.

The board of medical examiners shall define the scope of the practice of emergency medical services, different levels of the practice, and degree of supervision required of a supervising physician when a person certified under this part provides services within the practice of medicine.

§453-32 Certification of emergency ambulance personnel. The board of medical examiners shall certify individuals as qualified in emergency medical services upon application therefor; provided that the applicant for certification:

- (1) Holds a certificate from the National Registry of Emergency Medical Technicians, has satisfactorily passed a course of training in emergency medical services for emergency ambulance services personnel which shall be based on the national curriculum of the United States Department of Transportation and approved by the board, and meets other standards and qualifications, including passage of an examination, set by the board of medical examiners pertinent to the practice of emergency medical services in Hawaii;
- (2) Meets continuing education requirements which shall be set by the board of medical examiners; and
- (3) Meets other qualifications set by the board of medical examiners.

The board shall directly review the credentials of applicants and administer examinations required. Certification under this section shall be a prerequisite to the practice of emergency medical services as an employee of an emergency ambulance service.

The board of medical examiners shall provide standard application forms for the certification of emergency ambulance personnel and shall provide for the periodic renewal of such certification. The board of medical examiners shall assess a fee for such application, certification, and renewal. The board of medical examiners shall provide for the revocation, suspension, or limitation of certification in the event an individual once certified under this section fails to maintain or meet requirements for continued certification, or for good cause shown.

§453-32.1 Renewal of certification. (a) Every person holding a certificate under this part shall renew the certificate with the board no later than January 31 of each even-numbered year, pay a renewal fee, and comply with the continuing education requirements set forth in the board's rules.

(b) To determine compliance, the board may conduct a random audit. A person selected for audit shall be notified by the board. Within sixty days of notification, the person shall provide to the board documentation to verify compliance with the continuing education requirements.

(c) Failure to renew, pay the renewal fee, and, in the case of audited persons, provide documentation of compliance shall constitute a forfeiture of the certificate which may only be restored upon the submission of written application, payment to the board of a restoration fee, and in the case of audited persons, documentation of compliance.

(d) A certificate that has been forfeited for one renewal term shall be automatically terminated and cannot be restored, and a new application for certification shall be required.

§453-32.5 Temporary certification. The board shall approve temporary certification of an applicant under section 453-32 if the applicant has graduated from a board approved training program within twelve months of the date of application and has never taken the written and practical examination of the National Registry of Emergency Medical Technicians for that level of practice but otherwise meets the requirements of section 453-32, has filed a complete application with the board, and has paid all required fees.

If the applicant fails to apply for, or to take, the next succeeding examination or fails to pass the examination or fails to receive a certificate, all privileges under this section shall automatically cease upon written notification sent to the applicant by the board. A temporary certificate for each level of practice may be issued only once to each person.

Prior to practicing under temporary certification, applicants shall notify the board in writing of any and all employers under whom they will be performing services.

[§453-32.51] Limited temporary certification. (a) The board of medical examiners shall approve limited temporary certification of an applicant under this section if the applicant:

- (1) Has graduated from a board or state-approved training program as developed and promulgated by the United States Department of Transportation;
 - (2) Has passed the written and practical examinations of the National Registry of Emergency Medical Technicians for that level of practice;
 - (3) Holds a current certificate from the National Registry of Emergency Medical Technicians for that level of practice;
 - (4) Has submitted a letter verifying acceptance into a period of peer review as an emergency medical technician or mobile intensive care technician;
 - (5) Has filed a completed application with the board; and
 - (6) Has paid all the required fees.
- (b) Limited certification of any applicant shall be restricted to a maximum of one year.

(c) All privileges under this section shall automatically cease if the applicant receives certification under section 453-32 or 453-32.1 or is no longer participating in a period of peer review.

[§453-32.6] Delegation to committee of practicing emergency physicians and emergency ambulance personnel. The board of medical examiners shall establish a committee consisting of practicing emergency physicians and emergency ambulance personnel to assist the board in the performance of duties under this part.

The board, by written order, may delegate to the committee any of its powers and duties for administration of this part, except that the board shall not delegate any authority to adopt, amend, or repeal rules, take disciplinary action against a certificate holder, or restore a certificate which has been revoked.

[§453-33] Rules. The board of medical examiners shall adopt rules to implement this part, subject to chapter 91.

§453- Pain management guidelines. The board of medical examiners may establish guidelines for physicians with respect to patients' pain management. The guidelines shall apply to all patients with severe acute pain or severe chronic pain, regardless of the patient's prior or current chemical dependency or addiction, and may include standards and procedures for chemically dependent individuals.